

UNITED STATES BANKRUPTCY COURT
FOR THE MIDDLE DISTRICT OF PENNSYLVANIA

IN RE: : CHAPTER 13
: :
MICHAEL D. LEWIS and : CASE NO. 1-16-03906
SARA J. LEWIS :
f/k/a SARA J. BACKSTROM, :
: :
Debtors : :

CERTIFICATE OF SERVICE

I, Stacy A. Sollenberger, Legal Assistant with the firm of Schiffman, Sheridan & Brown, P.C., hereby certify that on February 16, 2017, a true and correct copy of the FIRST AMENDED CHAPTER 13 PLAN and NOTICE TO CREDITORS AND OTHER PARTIES IN INTEREST was served by certified mail and received by the following secured claim holder whose rights were impacted by the plan, per the attached certified green card:

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none">■ Complete items 1, 2, and 3.■ Print your name and address on the reverse so that we can return the card to you.■ Attach this card to the back of the mailpiece, or on the front if space permits.	<p>A. Signature X <u>T. Shields</u> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>
	<p>B. Received by (Printed Name) C. Date of Delivery</p>
<p>1. Article Addressed to: <u>Quantum 3 Group LLC</u> <u>as Agent for Sading Funding LLC</u> <u>Attn: officer Authorized to</u> <u>Accept Process</u> <u>P.O. Box 788</u> <u>Kirkland, WA 98083-0788</u></p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>2. Article Number (Transfer from service label) <u>7013 2250 0001 0857 8876</u></p>	<p>3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>
<p>9590 9402 1391 5285 1118 96</p>	
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053</p>	<p>Domestic Return Receipt</p>

SCHIFFMAN, SHERIDAN & BROWN, P.C.

By: /s/ Stacy A. Sollenberger
Stacy A. Sollenberger

Date: February 28, 2017